## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

**Application or Docket Number** 

101567,504

CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
1181	NATIONAL ST	TAGE FEES	(Column 1)		· (C	olumin 2)		RATE	FEE		RATE	FEE
			SMALL ENT. =	\$ 150	LARGE	ENT. = \$ 300		BASIC FEE	150	OR	BASIC FEE	
BASIC		·	Satisfies PCT Artic		All other situations =			EXAM. FEE			EXAM. FEE	
	INATION FEE	· · · · · ·	(4) = \$50/5 U.S. is ISA = \$5	0/\$100		00 / \$ 200 ner situations =			100		OF A DOLL FEE	
SEARCH FEE			ALL other coun \$ 200 / \$ 4			250 / \$ 500	i	SEARCH FEE	50		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			250 minus 100 =			/ 50 =		X \$ 125 =	375		X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			69 minus 20 = *			49		X \$ 25 =	1225	OR	X \$ 50 =	·
INDEPENDENT CLAIMS			minus 3 = *			_		X \$ 100 =		OR	X \$ 200 =	
MULT	IPLE DEPEND	ENT CLAIM PRE	ESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1900	OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	OTHER SMALL E	·
ΤΑ		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	* .	Minus	**		= .	1	X \$ 25 =	·	OR	X \$ 50 =	
MEN	Independent	* .	Minus	***		= .		X \$ 100 =		OR	X \$ 200 =	
∢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
┢	1							TOTAL ADDIT		OR	TOTAL ADDIT. FEE	
		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		HIG NUI PREV	umn 2) HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	7	X \$ 25 =		OR	X \$ 50 =	ļ
	Independent	*	Minus	***		= .	1	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+ \$ 180 =		OR	+ \$ 360 =	
							_	TOTAL ADDIT		OR	TOTAL ADDIT	
*	If the entry in col	umn 1 is less than t	he entry in column	2, write "(	)" in colum	nn 3. 20' enter "20"		Barbara Cam	pbell, PCT N	Vational	Stage Division	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												